

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>m G</i>		3/16/00
O.I.P.E. CLASSIFIER	<i>DS</i>	32	3/16/00
FORMALITY REVIEW	<i>DS</i>	1172	4/1/00
RESPONSE FORMALITY REVIEW			

BEST AVAILABLE COPY

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	3/17/00
2	3/17/00
3	3/17/00
4	3/17/00
5	3/17/00
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49	3/17/00
50	3/17/00

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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